

INFORMATIONAL LETTER NO. 2111-MC-FFS

DATE: March 10, 2020

TO: Iowa Medicaid Ambulance Providers

APPLIES TO: Managed Care (MC), Fee-for-Service (FFS)

FROM: Iowa Department of Human Services (DHS), Iowa Medicaid Enterprise (IME)

RE: Ground Emergency Medical Transportation (GEMT) Payment Program Update

EFFECTIVE: Upon receipt

As discussed in Informational Letter (IL) [2057-MC-FFS](#)¹, Iowa Medicaid will invoice providers monthly for the non-federal share of the provider-specific GEMT supplemental payments, and participating providers will need to send the funds to the agency as an Intergovernmental Transfer (IGT). In addition, providers participating in the program are required to re-submit claims to the IME and MCOs for services provided on and after July 1, 2019, to receive the GEMT supplemental payment per transport rate.

The purpose of this IL is to provide updates on the IGT payments, re-submission of claims, and information regarding the state fiscal year (SFY) 2021 provider enrollment.

IGT Payment of Non-Federal Share

Providers will receive a cover letter and IGT invoice electronically from iowaGEMTpaymentprogram@mslc.com. The cover letter will include information for providers to set up an electronic funds transfer (EFT) with DHS.

IME will be sending out electronic invoices to providers for the collection of the IGT amounts due for July 1, 2019, through April 30, 2020, by March 13, 2020, for MCO payments only. The due date of payment through an EFT for this invoice is March 31, 2020. For subsequent months, the IME will send out electronic invoices by the 15th of each month including both IME FFS and MCOs that is due by the last day of the month.

¹ https://dhs.iowa.gov/sites/default/files/2057-MC-FFS_GEMT_Payment_Program.pdf?022420201547

Re-Submission of Claims

After payment of the IGT amount due March 31, 2020, providers will be able to re-submit claims for GEMT services furnished on and after July 1, 2019. Providers must re-submit the claim as follows:

- The supplemental payment amount is only available for claims where the transportation is reported with one of the following emergency Healthcare Common Procedure Coding System (HCPCS) codes: A0225, A0427, A0429 or A0433.
- It is necessary for providers to add an additional line item entry to the claim for reporting HCPCS Code A0999. This HCPCS code is required for providers to receive the prospective GEMT supplemental payment per transport rate.
- Providers must bill their provider-specific GEMT supplemental payment per transport rate as the billed charge amount for procedure code A0999 to receive the full supplemental reimbursement amount per transport.
- The supplemental payment rate for all participating providers for services furnished on and after July 1, 2019, is a statewide average rate of \$1,183.97 per transport.
- Medicaid reimbursement is determined to be the lower of the billed charge amount or the provider-specific GEMT supplemental payment per transport rate.
- There must be Iowa Medicaid payment for a covered GEMT transport (i.e., base rate and mileage) for the obligation to pay the GEMT supplemental payment per transport rate (procedure code A0999) can occur by Iowa Medicaid.
- Claims must be resubmitted as corrected claims in order to help avoid timely filing denials and to stay within the corrected claims timeliness of 365 days.

Original claims submitted for subsequent months must follow the requirements listed above to receive supplemental payment.

SFY 2021 GEMT Supplemental Payment Provider Enrollment

To enroll in the GEMT supplemental payment program for SFY 2021, eligible providers who voluntarily choose to participate must:

- Complete the Annual Provider Participation Agreement
- Complete the SFY 2021 IGT Agreement
- Submitted the June 30, 2019, GEMT cost report by the January 31, 2020, deadline.

The Annual Provider Participation Agreement and SFY 2021 IGT Agreement are available at the [GEMT²](#) webpage. Return completed Annual Provider Participation Agreement and SFY 2021 IGT Agreement by April 30, 2020, to: costaudit@dhs.state.ia.us.

If you have additional questions, please contact IME Provider Cost Audit at 866-863-8610.

² <https://dhs.iowa.gov/ime/providers/tools-trainings-and-services/medicaid-initiatives/GEMT>